

INFORMATION & INSTRUCTIONS FOR FILING - MOTOR VEHICLE SALESPERSON

Access this form via website at: www.hawaii.gov/dcca/pvl

APPLICATION

Type or print legibly in dark ink. Answer ALL questions and sign the application.

If there are any "Yes" answers to questions 3 or 4, refer to the section on "Yes" answers on page 2.

Have your prospective employer complete the *Employer Certification* section.

Applicants are subject to requirements in effect at the time of filing.

- **Failure to provide all the requested information will delay the processing of your application.**

FEES

Attach the appropriate fee. Make check payable to *COMMERCE & CONSUMER AFFAIRS*:

If applying between July 1, even-numbered years and June 30,
odd-numbered years, pay \$160
(*Appln Fee-\$20* + License Fee-\$15 + CRF-\$110 + 1/2 Renewal-\$15*)

If applying between July 1, odd-numbered years and June 30,
even-numbered years, pay \$ 90**
(*Appln Fee-\$20* + License Fee-\$15 + CRF-\$55*)

TEMPORARY LICENSE **Include an additional \$ 20**
(*Issued to walk-in applicants upon applicant's request*)

***Once you are licensed as a salesperson, ALL FEES PAID are non-refundable.**

****All licenses, regardless of issuance date, are subject to renewal by June 30, even-numbered years.**

Note: *One of the numerous legal requirements that you must meet in order for your new license to be issued is the payment of fees as set forth in this application. You may be sent a license certificate before the check you sent us for your required fees clears your bank. If your check is returned to us unpaid, you will have failed to pay the required licensing fee and your license will not be valid, and you **may not** do business under that license. Also, a \$15.00 service fee will be charged for checks which are returned by the bank.*

If for any reason you are denied the license you are applying for, you may be entitled to a hearing as provided by Title 16, Chapter 201, Hawaii Administrative Rules, and/or Chapter 91, Hawaii Revised Statutes. Your written request for a hearing must be directed to the agency that denied your application, and must be made within 60 days of notification that your application for a license has been denied.

BOARD'S ADDRESS

Mail all required items to:

Motor Vehicle Industry Licensing Board
DCCA, PVL Licensing Branch
P. O. Box 3469
Honolulu, Hawaii 96801

or

Deliver to office location at:

335 Merchant St., Room 301
Honolulu, HI 96813
Phone: (808) 586-3000

TEMPORARY LICENSE

A Temporary License may be issued (**to walk-in applicants upon applicant's request**) if a completed application is submitted with an **additional fee of \$20.00** and verification that applicant will work for dealer immediately.

LAWS & RULES

A copy of Chapter 437, Hawaii Revised Statutes and Chapter 86, Hawaii Administrative Rules, may be obtained by submitting a written request to: Motor Vehicle Industry Licensing Board, Commerce & Consumer Affairs, P.O. Box 3469, Honolulu, Hawaii 96801. *Chapter 436B, Hawaii Revised Statutes, the Professional and Vocational Licensing Act should be read in conjunction with the above statutes.*

The laws and rules are also posted on our website at: www.hawaii.gov/dcca/pvl. Look under "Motor Vehicle Industry".

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This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.

Instructions for "Yes" Answers to Questions (3) and (4) of the Application for License (MOVE-01).

- A. The following documentation must be submitted with the license application. Applications for license will not be considered without this material.
- 1) Questions (4c) and (4d) refer to complaints, charges of unlicensed activity, or pending disciplinary actions for any profession, occupation, or license, both motor vehicle and those other than motor vehicle. If your answer is "yes" to one or more of these questions, read paragraph "B" below, AND you must submit the following:
 - i. A statement signed by you explaining the circumstances; and
 - ii. Copies of any documents from the agency, including final orders, petitions, complaints, findings of fact and conclusions of law, and any other relevant documents;
 - 2) If your application indicates a criminal conviction, read paragraph "B" below, and you must submit the following:
 - i. A statement signed by you explaining the circumstances leading to the conviction and detailing all activities since the conviction, including employment and business involvements. Include job title, period of employment, employer's name, description of duties, training attended, and educational courses attended;
 - ii. A copy of the court order, verdict, and terms of sentence; and
 - iii. If applicable, a copy of the terms of probation and/or parole and a notarized statement from your probation or parole officer as to your compliance with the court orders;
 - iv. A current criminal history record check in your name, which you may obtain from the Hawaii Criminal Justice Data Center. Contact the Department of the Attorney General, Hawaii Criminal Justice Data Center, Kekuanao'a Building, 465 S. King Street, Rm. 101, Honolulu, HI 96813. Ph: (808) 587-3100 or visit their website at: www.hawaii.gov/hcjdc to request a "Criminal History Record Check" form.
- B. If you answered "yes" to any of the question (3) or (4), your application will be reviewed at a Motor Vehicle Industry Licensing Board meeting if you have provided all applicable information and documents as described above. The Board will not review incomplete applications. If you wish to present oral testimony at the meeting, submit a written request with your application.

BIENNIAL RENEWAL

All licenses expire on June 30 of each even-numbered year and must be renewed by June 30, regardless of when the license was issued. License fees and renewal fees are not prorated.

| APPLICATION FOR LICENSE – MOTOR VEHICLE SALESPERSON | | | | | Approved _____ Initials/Date _____ | |
|---|--|--|---------------------------|--------------------|---|--|
| TO BE COMPLETED BY APPLICANT | Legal Name (First-Middle) | | (LAST) | | Lic. No. _____ CS - | |
| | Residence Address (Include Apt. No., City, State & Zip Code) | | | | MVD - | |
| | Mailing Address (ONLY if different from residence) | | | | | |
| | Social Security No. | | Phone No. (Days) | | | |
| | EMPLOYMENT RECORD. (Give full account of your time for the last 5 years. Include periods of unemployment, time in school & military service. Start with current or recent. If more space is needed, use a separate sheet, 8-1/2" x 11".) | | | | | |
| | <div style="display: flex; justify-content: space-between;"> Dates (Mo/Yr) </div> <div style="display: flex; justify-content: space-between;"> From To </div> | | Employer's Name & Address | | Nature of Employer's Business & your position title | |
| | | | | Reason for Leaving | | |
| <p>Circle Yes or No. Explain as needed. If response to question 3 or 4 is "yes", refer to instructions for additional documents that must be submitted with this application.</p> <p>1. Are you at least 18 years of age? YES NO</p> <p>2. Are you a U.S. citizen, a U.S. national, or an alien authorized to work in the United States? YES NO</p> <p>3. In the past 20 years have you ever been convicted of a crime in which the conviction has not been annulled or expunged? YES NO</p> <p>4a) Do you hold or have you ever held a MOTOR VEHICLE SALESPERSON license in Hawaii or in another jurisdiction? YES NO</p> <p style="padding-left: 20px;">b) If "yes", give name of jurisdiction and dates: _____</p> <p style="padding-left: 20px;">c) Has any license/certification/registration ever been suspended, revoked or otherwise subject to disciplinary action? YES NO</p> <p style="padding-left: 20px;">d) Are there any disciplinary actions pending against you? YES NO</p> | | | | | | |
| <p>APPLICANT CERTIFICATION:</p> <p>I hereby certify that I shall engage in the business or negotiate for the sales of motor vehicles only for the licensed dealer only who is designated on this application. I also certify that the statements on this application and on attached documents are true and correct to the best of my knowledge.</p> <p>I also certify that I have read, understand, and agree to comply with the laws and rules that the Board determines are required for licensure.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p>_____</p> <p style="text-align: center;">Date</p> </div> <div style="width: 45%;"> <p>_____</p> <p style="text-align: center;">Signature of Applicant</p> </div> </div> | | | | | | |
| <p>EMPLOYER CERTIFICATION:</p> <p>It is hereby certified that the person named on this application will be employed as a salesperson upon approval by the Board, by the undersigned, who is duly licensed to engage in the business of selling motor vehicles in the State of Hawaii at _____.</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <p>Subscribed and sworn to before me this _____ day of _____, 20____</p> <p>_____ Notary Public, State of _____ My Commission expires _____</p> <p style="font-size: small; margin-top: 20px;">This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.</p> </div> <div style="width: 45%;"> <p style="text-align: center;">Business Location</p> <p>_____</p> <p style="text-align: center;">Signature of Employer</p> <p>_____</p> <p style="text-align: center;">Print Name of Employer</p> <p>Title _____ Business Phone No.: _____</p> <p>Name of licensed MVD: _____</p> <p>Mailing Address _____</p> <p>License No. <u>MVD</u>-_____ Date _____</p> </div> </div> | | | | | | |

LICENSING BRANCH
PROFESSIONAL AND VOCATIONAL LICENSING DIVISION
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

TEMPORARY LICENSE - MOTOR VEHICLE SALESPERSON
(Issued to walk in applicants upon applicant's request)

This is to certify that the person named has been duly granted a **TEMPORARY** MOTOR VEHICLE SALESPERSON'S LICENSE for employment only at the dealer named below.

VALID ONLY WHEN SIGNED BY THE EXECUTIVE OFFICER OR REPRESENTATIVE OF THE MOTOR VEHICLE INDUSTRY LICENSING BOARD.

Fill in Name & Employer's Mailing Address in Block Below:

Temporary License No. _____

Effective Date _____

Name of Dealer

Executive Officer
Motor Vehicle Industry Licensing Board